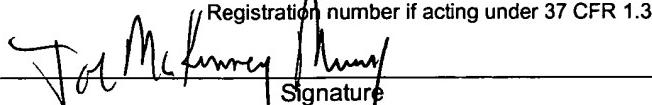


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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 3313-1016P	
Application Number 10/619,591-Conf. #7448		Filed July 16, 2003	
For COMPOSITIVE LAMINATE SUBSTRATE WITH INORGANIC SUBSTRATE AND ORGANIC SUBSTRATE			
Art Unit 2811		Examiner O. Nadav	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	<u>Fee</u>	<u>Small Entity Fee</u>	\$
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ 450.00
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input checked="" type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>02-2448</u> . I have enclosed a duplicate copy of this sheet.			
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input type="checkbox"/> attorney or agent of record. Registration Number _____ <input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 <u>32,334</u>  <u>Joe McKinney Muncy</u> <u>Typed or printed name</u>			
<u>November 25, 2005</u> <u>Date</u> <u>(703) 205-8000</u> <u>Telephone Number</u>			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/> Total of <u>1</u> forms are submitted.			

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FEE TRANSMITTAL For FY 2005		Complete if Known	
		Application Number	10/619,591-Conf. #7448
		Filing Date	July 16, 2003
		First Named Inventor	Shih-Hsien WU
		Examiner Name	O. Nadav
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	2811
TOTAL AMOUNT OF PAYMENT (\$ 850.00)		Attorney Docket No.	3313-1016P

METHOD OF PAYMENT (check all that apply)					
<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____	
<input type="checkbox"/> Deposit Account	Deposit Account Number: 02-2448		Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP		
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input type="checkbox"/> Charge fee(s) indicated below			<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17			<input checked="" type="checkbox"/> Credit any overpayments		

FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES			
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fees Paid (\$)	
	Utility	300	150	500	250	200	100	_____
	Design	200	100	100	50	130	65	_____
	Plant	200	100	300	150	160	80	_____
	Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____	
2. EXCESS CLAIM FEES								
Fee Description								
Each claim over 20 (including Reissues) _____								
Each independent claim over 3 (including Reissues) _____								
Multiple dependent claims _____								
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims				
33	- 25 = 8	x 50	= 400	Fee (\$)	Fee Paid (\$)	_____		
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	_____				
3	- 3 = 0	x _____	= _____	_____				
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)			
_____	- 100 = _____	/50 (round up to a whole number) x _____ = _____						
4. OTHER FEE(S)								
Excess Claim Fee						\$400.00		
Other (e.g., late filing surcharge): 1252 Extension for response within second month						450.00		

SUBMITTED BY							
Signature			Registration No. (Attorney/Agent)	32,334	Telephone	(703) 205-8000	
Name (Print/Type)	Joe McKinney Mundy		Date	November 25, 2005			